

Fill in this information to identify the case and this filing:

Debtor Name ViSalus, Inc.
United States Bankruptcy Court for the: Eastern District of Texas
(State)
Case number (if known): 24-42952

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/19/2024
MM / DD / YYYY

X

/s/ Nick Sarnicola

Signature of individual signing on behalf of debtor

Nick Sarnicola

Printed name

Authorized Representative

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name ViSalus, Inc.

United States Bankruptcy Court for the: Eastern District of Texas
(State)

Case number (if known): 24-42952

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$ 63,823,436.00

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$ 0.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*

\$ 0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*

\$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*

+ \$ 949,605,640.00

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ 949,605,640.00

Fill in this information to identify the case:

Debtor name ViSalus, Inc.United States Bankruptcy Court for the: Eastern District of Texas
(State)Case number (if known): 24-42952☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. _____ \$ 0.00

3.2. _____ \$ 0.00

4. Other cash equivalents (Identify all)

4.1. HARFENIST KRAUT & PERLSTEIN - Escrow Account \$ 20,000.00

4.2. _____ \$ _____

5. Total of Part 1

\$ 20,000.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3. **(None other than legal and professional retainers.)
- ☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. _____ \$ 0.00

7.2. _____ \$ 0.00

Debtor

ViSalus, Inc.
Name**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☒ No. Go to Part 4.☐ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**11a. 90 days old or less: _____ - _____ = →
face amount doubtful or uncollectible accounts \$ _____11b. Over 90 days old: _____ - _____ = →
face amount doubtful or uncollectible accounts \$ _____**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments**13. Does the debtor own any investments?**☐ No. Go to Part 5.☒ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ 0.00

14.2. _____ \$ 0.00

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. See attachment 15.1. _____ % \$ _____

15.2. _____ % \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ 0.00

16.2. _____ \$ 0.00

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

Debtor

ViSalus, Inc.
Name**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|--|---|------------------------------------|
| 19. Raw materials | | | | |
| _____ | MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 20. Work in progress | | | | |
| _____ | MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 21. Finished goods, including goods held for resale | | | | |
| _____ | MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 22. Other inventory or supplies | | | | |
| _____ | MM / DD / YYYY | \$ _____ | _____ | \$ _____ |
| 23. Total of Part 5 | | | | \$ _____ |
| Add lines 19 through 22. Copy the total to line 84. | | | | |

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 28. Crops—either planted or harvested | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 31. Farm and fishing supplies, chemicals, and feed | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 32. Other farming and fishing-related property not already listed in Part 6 | | | |
| _____ | \$ _____ | _____ | \$ _____ |

Debtor

ViSalus, Inc.
Name

Document

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Case number (if known) 24-42952

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☒ No. Go to Part 8.☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 39. Office furniture | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 40. Office fixtures | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |
| 42.1 _____ | \$ _____ | _____ | \$ _____ |
| 42.2 _____ | \$ _____ | _____ | \$ _____ |
| 42.3 _____ | \$ _____ | _____ | \$ _____ |

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☐ No☐ Yes

Debtor

ViSalus, Inc.
Name**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

| General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles | | | |
| 47.1 _____ | \$ _____ | _____ | \$ _____ |
| 47.2 _____ | \$ _____ | _____ | \$ _____ |
| 47.3 _____ | \$ _____ | _____ | \$ _____ |
| 47.4 _____ | \$ _____ | _____ | \$ _____ |
| 48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels | | | |
| 48.1 _____ | \$ _____ | _____ | \$ _____ |
| 48.2 _____ | \$ _____ | _____ | \$ _____ |
| 49. Aircraft and accessories | | | |
| 49.1 _____ | \$ _____ | _____ | \$ _____ |
| 49.2 _____ | \$ _____ | _____ | \$ _____ |
| 50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) | | | |
| _____ | \$ _____ | _____ | \$ _____ |
| 51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87. | | | \$ _____ |

52. Is a depreciation schedule available for any of the property listed in Part 8?

☐ No☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

☐ No☐ Yes

Debtor

ViSalus, Inc.
Name**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
- ☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

| Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available. | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|--|---|------------------------------------|
| 55.1 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.2 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.3 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.4 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.5 _____ | _____ | \$ _____ | _____ | \$ _____ |
| 55.6 _____ | _____ | \$ _____ | _____ | \$ _____ |

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
- ☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets See Attachment 60. | \$ _____ | _____ | \$ _____ Unknown |
| 61. Internet domain names and websites See Attachment 61. | \$ _____ | _____ | \$ _____ Unknown |
| 62. Licenses, franchises, and royalties _____ | \$ _____ | _____ | \$ _____ |
| 63. Customer lists, mailing lists, or other compilations _____ | \$ _____ | _____ | \$ _____ |
| 64. Other intangibles, or intellectual property _____ | \$ _____ | _____ | \$ _____ |
| 65. Goodwill _____ | \$ _____ | _____ | \$ _____ |

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ _____ Unknown

Debtor

ViSalus, Inc.
Name

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ — _____ = ➔ \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

See attached document. _____ Tax year _____ \$ _____
_____ Tax year _____ \$ _____
_____ Tax year _____ \$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 63,803,436.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

ViSalus, Inc.
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | \$ 20,000.00 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$ | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$ | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$ 0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$ | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$ | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$ | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$ | |
| 88. Real property. <i>Copy line 56, Part 9.</i> ➔ | | \$ |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$ Unknown | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | + \$ 63,803,436.00 | |
| 91. Total. Add lines 80 through 90 for each column. 91a. | \$ 63,823,436.00 | + 91b. \$ 0.00 |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | \$ 63,823,436.00 |


ATTACHMENT 15.1

Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture:

- Liv Global LLC – Delaware, US - FEIN: 61-1851259 - 100% ViSalus Inc
- Challenge Pro LLC – Delaware, US - FEIN: 32-0539095 - 100% ViSalus Inc
- ViSalus S. de R.L. de C.V. – Delaware, US - FEIN: 35-2601837 - 100% ViSalus Inc
- Body by Vi S. de R.L. de C.V - Mexico: RFC BBV170803PP0 - 99% ViSalus, Inc.
1% ViSalus S. de R.L. de C.V.
- ViSalus CV Holdings LLC – Delaware, US - 100% ViSalus Inc
- Challenge Europe CV - Netherlands: CCI 59354011 - 99% ViSalus Inc, / 1% ViSalus CV Holdings LLC
- ViSalus Co-op Holdings LLC – Delaware, US - FEIN: 35-2497092 100% Challenge Europe CV
- Vi Europe Cooperatief U.A. - Netherlands: CCI 59729430- 99% Challenge Europe CV , / 1% ViSalus Co-op Holdings LLC
- Vi International Holdings B.V. - Netherlands: CCI 58046119- 100% Vi Europe Cooperatief U.A.
- ViSalus Sciences Canada, Inc - Canada - CRA 815357355 - 100% Vi International Holdings B.V.
- Vi (UK) Holdings Ltd. - United Kingdom - 100% Vi International Holdings B.V.
- Vi Italia S.R.L - Italy: FC 08585340964 - 100% Vi International Holdings B.V.
- Vi Netherlands B.V. - Netherlands: CCI 60060662 - 100% Vi International Holdings B.V.
- Vi Austria GmbH - Austria: FN 405486 - 100% Vi International Holdings B.V.
- Vi Germany GmbH - Germany: HRB 95656 - 100% Vi International Holdings B.V.

ATTACHMENT 60

Patents, copyrights, trademarks, and trade secrets

| Mark/Name | Registration No. |
|---|-------------------------|
| CEREAL ENTREPRENEUR | |
| CHALLENGE TRAINER | |
| CRUNCH CHALLENGE | |
| FI-SORB | |
| I CHALLENGE YOU | |
| LOVE THE SHAKE? CHEW ON THIS | |
| NEON ENERGY DRINK | 4297569 |
| NEURO FUEL | |
| PUTTING THE 'REAL' IN CEREAL | |
| SHAKE IN A FLAKE | |
| VI CHALLENGE PRO | |
| VI=LIFE | |
| VI=LIFE and Design  | |
| VI-BITES | |
| VI-DIFFERENCE | 3653501 |
| VI-DIFFERENCE | 3603737 |
| VI-LIFE | |
| VI-LIFE | 4264037 |
| VIMMUNITY | 4234039 |
| VISALUS SCIENCES | 3312137 |

| Mark/Name | Registration No. |
|-------------------------------------|------------------|
| VISAL-US SCIENCES | |
| VISALUS SHAPER HEALTH FLAVOR MIX-IN | |
| VISALUS TSS | 3627971 |
| VISALUS VI-DIFFERENCE | |
| VISALUS VI-NET | 4099299 |
| VISAL-US VI-NET | |
| VISALUS VI-Q | |
| WHERE GIVING IS GOING | 3660071 |
| YOU'LL BE BOWLED OVER | |
| YOUR CHALLENGE GOAL IN A BOWL | |
| VISALUS | MI M05174 |

ATTACHMENT 61

Internet domain names and websites

- mylivlist.com
- timetoliv.com
- visalus.info
- visalusclassactionlawsuit.com
- visaluslawsuit.com
- viclassactionlawsuit.com

ATTACHMENT 70

Tax refunds and unused net operating losses (NOLs)

| NET OPERATING LOSS DEDUCTION STATEMENT 4 | | | | |
|--|----------------|-------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 12/31/13 | 24,835,811. | 2,890,100. | 21,945,711. | 21,945,711. |
| 12/31/15 | 13,088,217. | | 13,088,217. | 13,088,217. |
| 12/31/16 | 7,562,836. | | 7,562,836. | 7,562,836. |
| 12/31/17 | 4,638,412. | | 4,638,412. | 4,638,412. |
| 12/31/18 | 5,988,658. | | 5,988,658. | 5,988,658. |
| 12/31/19 | 1,751,561. | | 1,751,561. | 1,751,561. |
| 12/31/21 | 8,828,041. | | 8,828,041. | 8,828,041. |
| NOL AVAILABLE THIS YEAR | | | 63,803,436. | 63,803,436. |

Fill in this information to identify the case:

Debtor name ViSalus, Inc.
 United States Bankruptcy Court for the: Eastern District of Texas
 (State)
 Case number (if known): 24-42952

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☐ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.1 Creditor's name

Describe debtor's property that is subject to a lien

 \$ _____ \$ _____

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- ☐ No
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Describe the lien

Is the creditor an insider or related party?

- ☐ No
☐ Yes

Is anyone else liable on this claim?

- ☐ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.2 Creditor's name

Describe debtor's property that is subject to a lien

 \$ _____ \$ _____

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- ☐ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

Describe the lien

Is the creditor an insider or related party?

- ☐ No
☐ Yes

Is anyone else liable on this claim?

- ☐ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2. Creditor's name

Describe debtor's property that is subject to a lien

\$ _____

\$ _____

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

☐ No☐ Yes

Date debt was incurred _____

Is anyone else liable on this claim?

☐ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

☐ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**2.** Creditor's name

Describe debtor's property that is subject to a lien

\$ _____

\$ _____

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

☐ No☐ Yes

Date debt was incurred _____

Is anyone else liable on this claim?

☐ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

☐ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

[illegible]

Fill in this information to identify the case:

Debtor ViSalus, Inc.

United States Bankruptcy Court for the: Eastern District of Texas
(State)

Case number 24-42952
(If known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Total claim

Priority amount

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

2.2 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (qqqqq)

2.3 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (____)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | Amount of claim | |
|-----|---|--|-----------------|
| 3.1 | Nonpriority creditor's name and mailing address <u>Adam Morgan</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 8,125.00 |
| 3.2 | Nonpriority creditor's name and mailing address <u>Aldo Moreno</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 311,498.00 |
| 3.3 | Nonpriority creditor's name and mailing address <u>Artesian Water</u> <u>2193 Avon Industrial Dr.</u> <u>Rochester Hills, MI 48309</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Goods</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 5,400.00 |
| 3.4 | Nonpriority creditor's name and mailing address <u>Blake Mallen</u> <u>16832 Calle de Sarah</u> <u>Pacific Palisades, CA 90272</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 3,985,568.00 |
| 3.5 | Nonpriority creditor's name and mailing address <u>Blyth VSH Acquisition Corp.</u> <u>59 Armstrong Rd.</u> <u>Plymouth, MA 02360</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 6,478,555.00 |
| 3.6 | Nonpriority creditor's name and mailing address <u>Brownstein Hyatt Farber Schreck, LLP</u> <u>2049 Century Park E Ste 3550</u> <u>Los Angeles, CA 90067-3217</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Legal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 17,743.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|--|--------------|
| 3.7 | Nonpriority creditor's name and mailing address Bryan Cave LLP 120 Broadway #300 Santa Monica, CA 90401 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 4,991.00 |
| 3.8 | Nonpriority creditor's name and mailing address Carlo Pacileo _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 25,000.00 |
| 3.9 | Nonpriority creditor's name and mailing address CCH Incorporated 2050 W 190th St Torrance, CA 90504 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 14,059.00 |
| 3.10 | Nonpriority creditor's name and mailing address Cintas Corporation 232 E Maple Rd Troy, MI 48083 Date or dates debt was incurred <u>5/1/2017</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 105.00 |
| 3.11 | Nonpriority creditor's name and mailing address Cogent 3331 W Big Beaver Road Ste210 Troy, MI 48084 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 10,531.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|--|---------------|
| 3.12 | Nonpriority creditor's name and mailing address Fred Heim Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 6,500.00 |
| 3.13 | Nonpriority creditor's name and mailing address Gemini Pharmaceuticals 87 Modular Ave Commack, NY 11725 Date or dates debt was incurred 10/24/2020 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 22,029.00 |
| 3.14 | Nonpriority creditor's name and mailing address Gibson Dunn 333 South Grand Ave Los Angeles, CA 90071-3197 Date or dates debt was incurred 10/24/2020 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 216,992.00 |
| 3.15 | Nonpriority creditor's name and mailing address Goodwin Procter LLP 601 S Figueroa St 41st Floor Los Angeles, CA 90017 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 9,154.00 |
| 3.16 | Nonpriority creditor's name and mailing address Healey Fire Protection Inc. 134 Northpointe Dr Orion Twp, MI 48359 Date or dates debt was incurred 7/1/2017 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 1,000.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|---|--------------|
| 3.17 | Nonpriority creditor's name and mailing address Heshi Mahinrod Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ 20,000.00 |
| 3.18 | Nonpriority creditor's name and mailing address Honigman Miller Schwarts and Cohn 200 Ottawa Ave NW Ste 700 Grand Rapids, MI 49503-2426 Date or dates debt was incurred 3/8/2020 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 5,288.00 |
| 3.19 | Nonpriority creditor's name and mailing address Jackson Lewis 725 S Figueroa St Ste 2500 Los Angeles, CA 90017 Date or dates debt was incurred 4/6/2021 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 24,250.00 |
| 3.20 | Nonpriority creditor's name and mailing address JAMS 555 W 5th St 32nd Floor Los Angeles, CA 90013 Date or dates debt was incurred 1/18/2022 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 24,212.00 |
| 3.21 | Nonpriority creditor's name and mailing address John Laun 204 Paseo De Las Delicias Redondo Beach, CA 90277 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 54,054.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|--|---------------|
| 3.22 | Nonpriority creditor's name and mailing address John Tolmie Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 121,875.00 |
| 3.23 | Nonpriority creditor's name and mailing address Joshua Beal RLT 7852 Ashwood Dr SE Ada, MI 49301 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 48,358.00 |
| 3.24 | Nonpriority creditor's name and mailing address Keller and Heckman LLP Three Embarcadero Ctr Ste 1420 San Francisco, CA 94111 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 770.00 |
| 3.25 | Nonpriority creditor's name and mailing address King & Wood Mallesons LLP 2500 Sand Hill Rd Ste 111 Menlo Park, CA 94025 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 1,475.00 |
| 3.26 | Nonpriority creditor's name and mailing address Lori Wakefield c/o J. Aaron Lawson Edelson PC 150 California St 18th Fl San Francisco, CA 94111 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ unknown |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|--|-------------------|
| 3.27 | Nonpriority creditor's name and mailing address Wakefield v. ViSalus Certified Class c/o Scott F. Kocher Forum Law Group, 811 SW Naito Pkwy, Ste. 420 Portland, OR 97204 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Legal Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ 925,000,000.00 |
| 3.28 | Nonpriority creditor's name and mailing address Manatt, Phelps & Phillips, LLP 2049 Century Park E #1700 Los Angeles, CA 90067 Date or dates debt was incurred 11/24/2020 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 121,660.00 |
| 3.29 | Nonpriority creditor's name and mailing address Morgan Lewis & Bockius 300 S Grand Ave 22nd Floor Los Angeles, CA 90071-3132 Date or dates debt was incurred 11/19/2021 Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 26,617.00 |
| 3.30 | Nonpriority creditor's name and mailing address Mover Services Inc. 721 E Compton Blvd Compton, CA 90220 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 2,525.00 |
| 3.31 | Nonpriority creditor's name and mailing address Nick Sarnicola 851 NE 1st Ave #4601 Miami, FL 33132 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 5,117,981.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|---|---------------|
| 3.32 | Nonpriority creditor's name and mailing address Office 1 5805 Sepulveda Blvd Ste 720 Van Nuys, CA 91411 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 710.00 |
| 3.33 | Nonpriority creditor's name and mailing address OfficeTeam 400 S Hope St Ste 900 Los Angeles, CA 90071-2808 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 1,490.00 |
| 3.34 | Nonpriority creditor's name and mailing address Para-Rescue IT 1125 Glenwood Rd Glendale, CA 91202 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 90.00 |
| 3.35 | Nonpriority creditor's name and mailing address Paul Noack Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ 254,458.00 |
| 3.36 | Nonpriority creditor's name and mailing address Pure Waters 720 S Garfield Traverse City, MI 49686 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Goods Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 6,375.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|--|-----------------|
| 3.37 | Nonpriority creditor's name and mailing address Rob Kamman Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 3,750.00 |
| 3.38 | Nonpriority creditor's name and mailing address Ropart Investments LLC 3 Greenwich Office Park Ste 225 Greenwich, CT 06831 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 265,853.00 |
| 3.39 | Nonpriority creditor's name and mailing address Ryan Blair 2651 La Cuesta Dr Los Angeles, CA 90046 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 2,917,599.00 |
| 3.40 | Nonpriority creditor's name and mailing address Seyburn Kahn, P.C. 2000 Town Center Ste. 1500 Southfield, MI 48075 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 22,238.00 |
| 3.41 | Nonpriority creditor's name and mailing address Silvia Uribe Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 28,750.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|--|---|---------------|
| 3.42 | Nonpriority creditor's name and mailing address Teris Phoenix 11333 N Scottsdale Rd Ste 294 Scottsdale, AZ 85254 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 400.00 |
| 3.43 | Nonpriority creditor's name and mailing address The Bureau of National Affairs Inc. 1801 S Bell St Fl 5 Arlington, VA, 22202-4506 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 13,426.00 |
| 3.44 | Nonpriority creditor's name and mailing address Todd A. Goergen 30 Konittekock Rd Greenwich, CT 06831 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 807,041.00 |
| 3.45 | Nonpriority creditor's name and mailing address TPx 303 Colorado St Ste 2075 Austin, TX 78701 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Utility Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 14,193.00 |
| 3.46 | Nonpriority creditor's name and mailing address Tyler Schuessler Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 15,000.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|---|-----------------|
| 3.47 | Nonpriority creditor's name and mailing address UPS 55 Glenlake Parkway NE Atlanta, GA 30328 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 16,184.00 |
| 3.48 | Nonpriority creditor's name and mailing address Vedder Price 1925 Century Park East Ste 1900 Los Angeles, California 90067 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 26,052.00 |
| 3.49 | Nonpriority creditor's name and mailing address Verizon One Verizon Way Basking Ridge, New Jersey 07920 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Utility Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 77,704.00 |
| 3.50 | Nonpriority creditor's name and mailing address ViRAM LLC Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 3,384,267.00 |
| 3.51 | Nonpriority creditor's name and mailing address Wells Fargo Bank, N.A. 150 E 42nd St New York, NY 10017 Date or dates debt was incurred Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 3,053.00 |

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | | | |
|------|---|---|--------------|
| 3.52 | Nonpriority creditor's name and mailing address Westin Peachtree Plaza 210 Peachtree St NW Atlanta, GA 30303 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Venue Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 15,819.00 |
| 3.53 | Nonpriority creditor's name and mailing address Wilkinson Barker Knauer, LLP 1800 M Street NW Suite 800N Washington, DC 20036 Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$ 44,873.00 |
| 3.54 | Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ _____ |
| 3.55 | Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ _____ |
| 3.56 | Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | \$ _____ |

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|--|--|---|
| 4.1. Eve-Lynn J. Rapp, Attorney for Lori Wakefield Edelson PC 1728 16th St Ste 210, Boulder, CO 80302 | Line 3.26 <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.2. Simon Franzini, Attorney for Lori Wakefield Dovel & Luner, LLP 201 Santa Monica Blvd., Ste. 600, Santa Monica, CA 90401 | Line 3.26 <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.3. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.4. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.5. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.6. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.7. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.8. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.9. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.10. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.11. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |
| 4.12. _____ _____ _____ | Line _____ <input type="checkbox"/> Not listed. Explain _____ | ____ _ |

Part 4:**Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**

Total of claim amounts

5a. **Total claims from Part 1**5a. \$ 0.005b. **Total claims from Part 2**5b. + \$ 949,605,640.005c. **Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

5c. \$ 949,605,640.00

Fill in this information to identify the case:

Debtor name ViSalus, Inc.

United States Bankruptcy Court for the: Eastern District of Texas
(State)

Case number (If known): 24-42952 Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

| | | | |
|-----|---|---------------|-----------|
| 2.1 | State what the contract or lease is for and the nature of the debtor's interest | Phone Number | Vonage |
| | State the term remaining | 12/31/24 | |
| | List the contract number of any government contract | | |
| 2.2 | State what the contract or lease is for and the nature of the debtor's interest | Email | Microsoft |
| | State the term remaining | 10/08/25 | |
| | List the contract number of any government contract | | |
| 2.3 | State what the contract or lease is for and the nature of the debtor's interest | Cloud Storage | Dropbox |
| | State the term remaining | 6/25/25 | |
| | List the contract number of any government contract | | |
| 2.4 | State what the contract or lease is for and the nature of the debtor's interest | Mail | PO Box |
| | State the term remaining | 12/31/24 | |
| | List the contract number of any government contract | | |
| 2.5 | State what the contract or lease is for and the nature of the debtor's interest | | |
| | State the term remaining | | |
| | List the contract number of any government contract | | |

Fill in this information to identify the case:

Debtor name ViSalus, Inc.

United States Bankruptcy Court for the: Eastern District of Texas
(State)

Case number (If known): 24-42952

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

| Column 1: Codebtor | | Column 2: Creditor | |
|--------------------|--|--------------------|--|
| Name | Mailing address | Name | Check all schedules that apply: |
| 2.1 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.2 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.3 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.4 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.5 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.6 | <div>Street</div> <div>City State ZIP Code</div> | | <input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |